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U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION DECORP

10 April 12 19 1

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875											0-603766			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL	ENTITY	OR		ER THAN	7	
FOR		NUMBER FILED			MAMBER EXTRA			RATE	FEE	7		T	-	
BASIC FEE (37 CFR 1.16(a))								IVILE	, ,	┨	RATE	FEE	┨	
TOTAL CLAIMS (37 CFR 1.16(c))		2 minus 20 = .					1	xs •	+	- or		<del></del>	4	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		Thines 3 =					┨	xs =	<del> </del>	⊢ OR	X \$	-		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							1	+3 =	+	OR	× 5		╣	.: .
* If the difference in column 1 is less than zero, enter "O" in column 2.								TOTAL	<del>                                     </del>	OR'	+5	+	┨	<u> </u>
CLAIMS AS AMENDED - PART II								VOIAL	L	_  OR	TOTAL			
	CDAING	NIN CA	CINDE	U - PA	ARI II				•		:-			
		AIMS	<del></del>	<u>-</u>	Calumn 2)	(Column 3)	_	SMALL	ENTITY	OR _		R THAN · · L ENTITY · ·	1::	<b>-</b> .
Total (2) OR 1.16(2) Independent (2) CR 1.16(3)	) REM	AINING TER IDMENT		PRE	IGHEST UMBER EVIOUSLY MD FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		-RATE	ADDI- TIONAL		
D Total	, 3	7	Minus		26	1.5	$\mathbb{L}$	x, 25.	1	1	- 50 ···	FEE	d	::
Z Independent UJ CJR 1.16(b)	, [	ス	Minus	1	3	- /-	1	x s/00.	<u> </u>	OR	x 200	1/2-	-	; <u>;</u>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							1	+./80.	<b> </b>	1	1.36Q		-	
/ /							J	TOTAL ADD'L FEE		OR OR	TOTAL	20	┨┈	•
10/4//	5 (Colu	mn 1}		(C	Column 2)	(Column 3)		ADD 1766		] ok	ADD'L FEE	1090	┨	•
* XIE	REMA	IMS WING TER OMENT	•	HII NL PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADOI- TIONAL		RATE	ADDI- TIONAL	-	
O (31 O'R 1,16(d)		37	Minus		31			x35.			x:50	FEE -	1	
[Old (37 CFR 1,14(x))]  Control (37 CFR 1,14(x))  Control (37 CFR 1,14(x))  Control (37 CFR 1,14(x))	1	3	Minus	***	3			x 100=		-GR	2cn		{ }	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR-1.16(d))								+.180=		OR	300	· · · · ·	{   '	
							3	TOTAL ADOL FEE		OR	TOTAL		1	
	(Cotun	n 11		<b>,</b> C-	olumn 2)	(Column 3)		ADDE FEE		OR	ADO'L FEE			
	CLA REMA AFT AMEND	IMS INING ER		HIG NU PREV	MEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL - FEE		RATE	ADDI- TIONAL-	-	
Total profit ingo			Minus	••		-		x; =	FEE			FEE	,	·····; ·
Total promining independent (27 off 1.160)	1.		Minus	***	.	=	1	x : =		OR	X \$=		<b>1</b> '	· : .
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))										OR	X \$			
						لـــــــا	L	TOTAL ADO'L FEE		OR	TOTAL	<del></del>		•
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the engreeding.									OR	ADO'L FEE				
The Highest N	lumber Pre	iously Pai	d For (1	olal or	Independer	nd) is the higher	si nı	o. Imber found in D	w ennran	· · · aluar	Ti			,7,7,7, <del>-</del> 7,7

The Trighest Number Previously Paid For' IN THIS SPACE is less than 3, enter '3'.

The Trighest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public; which is to file, (and by, the Custor of Previously 18 governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS

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